Florida HEALTH Department of Health

JUAN CARLOS CANTU

License Number: ACN673

Data As Of 11/2/2026

Profession	Area of Critical Need Medical Doctor
License	ACN673
License Status	Clear/Active
Qualifications	Dispensing Practitioner
License Expiration Date	1/31/2028
License Original Issue Date	06/26/2015
Address of Record	7359 Lake Underhill Rd ORLANDO, FL 32822
Controlled Substance Prescriber (for the Treatment of Chronic Non-malignant Pain)	No
Discipline on File	No
Public Complaint	No

Secondary Locations

Address

8421 S ORANGE BLOSSOM TRAIL STE. 124
ORLANDO, FL 32809

Discipline/Admin Action

Emergency Actions

No Emergency Actions Found

Discipline Cases

No Discipline Found

Public Complaints

No Public Complaint Found

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

Discipline Public Records Request

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:
Division of Medical Quality Assurance
Public Records
4052 Bald Cypress Way, Bin C01
Tallahassee, FL 32399-3251

Please include the following:
1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a $25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

Supervising Practitioners

Name	Relationship	Profession	License	Effective Date
BROWARD COUNTY HEALTH DEPARTMENT	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY		09/01/2015

Name	Relationship	Profession	License	Effective Date
NIGHT LITE PEDIATRICS CENTER	AREA OF CRITICAL NEED FACILITY	MEDICAL RELATED PROCESS ENTITY		11/12/2020

Click on the License Number to view License Details for that Practitioner

Subordinate Practitioners

Name	Relationship	Profession	License	Effective Date
ARBOGAST, LOGAN BENJAMIN	SUBORDINATE	PHYSICIAN ASSISTANT	9112360	7/29/2019
BOYD, JEFFREY STEPHEN	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9101362	10/21/2026
BOYD, JEFFREY STEPHEN	SUBORDINATE	PHYSICIAN ASSISTANT	9101362	3/28/2018
REMIREZ, MARIO JOSE JR	PRESCRIBING PHYSICIAN ASSISTANT	PHYSICIAN ASSISTANT	9100248	10/21/2026
REMIREZ, MARIO JOSE JR	SUBORDINATE	PHYSICIAN ASSISTANT	9100248	4/8/2019
SCHNEIDER, LINDSAY MARIE	SUBORDINATE	PHYSICIAN ASSISTANT	9111956	4/9/2019

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